### **CERTIFICATE OF REINSTATEMENT**

**LIMITED LIABILITY COMPANY** 

### **MAILING ADDRESS:**

Commercial Recording Division Connecticut Secretary of the State P.O. Box 150470 Hartford, CT 06115-0470 860-509-6003

### **DELIVERY ADDRESS:**

Commercial Recording Division Connecticut Secretary of the State 30 Trinity Street Hartford, CT 06106 860-509-6003

## THE CERTIFICATE OF REINSTATEMENT MUST BE FILED WITH A CURRENT ANNUAL REPORT.

Space For Office Use Only	Filing Fee:	\$60.00 Make Checks Payable to "Secretary of the State"
Please contact the Department of Revenu  1. NAME OF LIMITED LIABII		or as to any potential tax liability relating to your business.
2. APPOINTMENT OF REGISTERED AGENT		Please select only one A or B)
A. Individual's Name		Business address (P.O. Box is unacceptable)
		Residence address (P.O. Box is unacceptable)
B. Business Entity		Address (P.O. Box is unacceptable)
	Acceptance of a	ppointment
Signature of agent		
	3. EXECU	TION
Dated this	day of _	
Print or type name of signatory	Capacity of signator	y Signature

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Please call our office at (860) 509-6003 to obtain the reinstatement Annual Report.

Please contact the Department of Revenue Services or your tax advisor as to any potential tax liability relating to your business.

# INSTRUCTIONS FOR COMPLETION OF THE CERTIFICATE OF REINSTATEMENT CONNECTICUT LIMITED LIABILITY COMPANY

- 1. NAME OF LIMITED LIABILITY COMPANY: Please provide the complete name of the limited liability company, as it appeared on the records of the Secretary of the State. If the name is no longer available, please complete and file Articles of Amendment, along with the Certificate of Reinstatement, changing the name of the limited liability company to an available name.
- 2. APPOINTMENT OF REGISTERED AGENT: The limited liability company must appoint a registered agent. It may <u>not</u> appoint itself as its registered agent. The registered agent may be a natural person who is a resident of Connecticut; a Connecticut corporation; limited liability company; registered limited liability partnership or statutory trust or a foreign corporation; limited liability company; registered limited liability partnership or statutory trust which has a certificate of authority to transact business in Connecticut.

Please note the following: if the agent being appointed is a natural person, that person's business address must be provided under the heading Business address and their residence address under the heading Residence address; if the agent appointed is an entity organized under the laws of this state it must provide its principal office address under the Address heading; if the agent appointed is an entity not organized under the laws of this state it must provide its principal office in this state, if any. In each case the agent must sign accepting the appointment in the space provided; the signatory must state the capacity under which they sign if signing on behalf of a business entity; and all addresses must include a street number, street name, city, state and postal code. Complete street addresses required. **P.O. Boxes are only acceptable as additional address information.** 

3. EXECUTION: The document must be executed by an authorized official of the limited liability company. That person must print or type their name, state the capacity under which they sign and provide a signature. The execution constitutes a legal statement under the penalties of false statement that the information provided in the document is true.

Rev. 08/23/2007